# Application Checklist

Please use this checklist to ensure the completeness and accuracy of your application.

- Complete the UCCS High School Concurrent Application. **No** application fee is required.
- Include a **sealed, official** high school transcript, including rank in class.
- Include ACT, SAT, or PSAT test results if available.
- Complete this supplemental application, including all signatures.

**NOTE:** High school concurrent admission is for **ONE** term only. You must submit a new “Supplemental Application” for each term you wish to attend.

## Principal/Counselor Signature

I have reviewed the education plans of _______________ and the admission requirements, listed below. I recommend admission on a concurrent basis for the _______________ term of 20___.

Admissions Requirements (must meet all three):

- Top 10%-20% high school rank-in-class.
- Completion of 4.5 or more academic units each year of high school.
- ACT composite of 25 or SAT combined score of 1120 or PSAT combined score of 1410 if available.

Date: ___________________________  Signature: ___________________________

## Parent Signature

I understand that college credit earned by a high school student will count in the University record and that all academic/conduct rules of the University will apply to my child.

Date: ___________________________  Signature: ___________________________

## Applicant Signature

Please list your proposed subject areas of study:

__________________________________________________________

I understand that all grades earned while enrolled as a concurrent student will form part of my overall college GPA and that I must report my attendance at the University to any subsequent college or university which I attend.

Date: ___________________________  Signature: ___________________________

__Soc. Sec. #:_____________________

## Admissions Committee Action

Action: ___________________________

Date: ___________________________  Signature: ___________________________
Select the semester and indicate year of expected enrollment:

- Fall
- Spring
- Year

TYPE ALL INFORMATION: Answer all questions completely. Attach additional sheets if necessary.

Full legal name:
(Do not use nickname) First Middle Last

Social Security No.:

Birthdate: Present Age:

Mailing Address:

City State Zip Code

Home/Cell Phone

Work Phone

No & Street or P.O. Box

Email Address:

Permanent Address (if different from mailing):

City State Zip Code

No & Street or P.O. Box

Nation of Citizenship:
If not a U.S. citizen, what type of visa do you have?

If you are a permanent resident (immigrant), please attach a photocopy of your alien registration card.

The following Selective Service question must be answered to comply with Colorado State law:
If you are a male between the ages of 17 years and 9 months and 26 years, are you registered with the Selective Service?

Yes No

Information on race/ethnicity will be used in the admission process only for statistical analysis. Providing this information is voluntary.

Are you Hispanic, Chicano, Mexican, Latino, Cuban, Puerto Rican, South or Central American, or Spanish origin?

Yes No

Select one or more:
- American Indian/Alaskan Native
- Black or African-American
- Native Hawaiian or other Pacific Islander
- Asian
- White

If you checked American Indian or Alaskan Native: Are you an enrolled member of a federally or state recognized tribe, with tribal affiliation documentation?

Yes No

Emergency Contact Information:

Last Name First Name Relationship to applicant Phone

Address

City State Zip Code

Number & Street

List the high school you earned/will earn your diploma from and all colleges attended. Failure to provide complete information may result in delay in admission, loss of transfer credit, and/or dismissal. Include correspondence and extension courses.

High School:

Name City State Zip Code

Highest grade completed Date of High School graduation

If not a high school graduate, have you earned a state GED certificate?

Yes No

If "Yes," photocopy must be attached

List ALL colleges and universities you have attended or earned credit from, including University of Colorado campuses. Attach additional sheets if necessary.

*ALL APPLICANTS MUST REQUEST OFFICIAL TRANSCRIPTS TO BE SENT TO UCDC*

From every college or university they have ever attended or earned credit from:

Name of Institutions (first to last) City, State, Zip Dates of Attendance Credit Hours Completed Degree Earned

Rev. 04/2013
Are you claiming Colorado residency and in-state tuition classification?  

| O Yes | O No |

**COMPLETE THIS SECTION IF YOU ARE CLAIMING COLORADO IN-STATE TUITION CLASSIFICATION**

Failure to complete each question fully will result in your being classified as a nonresident.
The information you provide will be kept confidential and is used solely to determine residency.
Your Parent

| Dates of continuous physical presence in Colorado (mo/yr) | __/___ to __/___ |
| Date Colorado Driver’s License was originally issued (mo/yr) | __/___ |
| List exact years of Colorado Motor Vehicle registration (mo/yr) | __/___ to __/___ |
| Date of Colorado Voter Registration (mo/yr) | __/___ |
| Dates of employment in Colorado (mo/yr) | __/___ to __/___ |
| Exact years for which resident Colorado income taxes were filed | __ to __ |
| Dates of military service, if applicable (mo/yr) | __/___ to __/___ |
| Dates of extended absences from Colorado (2 months or more in duration) (mo/yr) | __/___ to __/___ |
| Reason for absence | ____________________________________________________________________________ |

If your parents are separated or divorced, which one lives in Colorado?  

**IMPORTANT: ALL APPLICANTS MUST ANSWER THE QUESTIONS BELOW AND SIGN THE APPLICATION**

1. Do you have a pending criminal charge OR have ever been convicted of a crime, made a plea of guilty, accepted a deferred judgment, been adjudicated, or been required to register as a sex offender? (Misdemeanor traffic offenses are exempt)  

| O Yes | O No |

2. Have you ever been placed on probation, suspended, expelled, or been subject to official disciplinary action from any high school or postsecondary institution for any academic misconduct or behavioral misconduct?  

| O Yes | O No |

If you answered "Yes" to either of the above questions, please attach a statement of explanation.

I hereby certify that to the best of my knowledge the information furnished in this application is true and complete. I understand that if found to be otherwise, it is sufficient cause for rejection or dismissal. I understand that if admitted as an unclassified student a maximum of 12 hours may be applied to an undergraduate degree or 9 hours MAY be applied to a graduate degree. By typing my name below, I understand it constitutes a legally binding signature pursuant to the Uniform Electronic Transmissions Act (UETA), section 2.

2. Applicant's Signature ____________________________ Date __________

**HIGH SCHOOL OFFICIAL:** Please fill in (Freshmen applicants only who are currently enrolled in high school)

GPA ___________ (4.0 scale)

Rank in Class __________ For how many semesters? __ OR check here □ By Policy of this high school, students are never ranked in class.

Signature of high school official: ____________________________ Title: ____________________________

Rev. 04/2013
Concurrent Enrollment Agreement

You have indicated that you are interested in enrolling in a college course while a high school student. The State of Colorado provides several options for high school students who meet high school standards to begin college early. The purpose of these options is to provide academic challenges and access to academic courses that may not be available at a local high school, to meet high school graduation requirements.

Persons under 21 years of age, enrolled in grades 9-12 in a school district, demonstrating academic and personal readiness for college level courses, are eligible for Concurrent Enrollment programs. Concurrent Enrollment students earn both high school and college credit for the same course, and the students’ share of the college tuition is paid by the school district. Full-time high school students retained beyond grade 12 may not enroll in more than 9 total Concurrent Enrollment college credits during the repeat year. To enroll at an eligible postsecondary institution, a student must complete the minimum course prerequisites and all required assessments.

SECTION A: Completed by Student (Print)

Name of Student ____________________________ Semester/Year ____________________________

Student ID (S#) ____________________________ SASID ____________________________

Address __________________________________ City ____________________________ Zip ________

Phone ____________________________ Email ____________________________

Date of Birth ____________________________ Age ____________________________ Grade in School ________

Currently Attending: ____________________________ High School ____________________________

Name of Parent / Guardian ____________________________

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<tr>
<th>Subject</th>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
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Attention High School Counselor: Your initials above, verify that the course(s) align with the Student’s ICAP.

Section B: Student Eligibility: Completed by High School Counselor.

Check all that apply:

☐ This Student is under 21 years of age.

☐ This Student has the maturity and personal readiness to enroll in a college level course and to complete the assignments for the course.

☐ The School District agrees to pay the tuition for _______ courses / credits this term, based on tuition rates set by SBCCOE.

☐ This Student is eligible to enroll in remediation courses at the college (grade 12 only).

☐ This student is enrolled as a fifth year senior and is eligible for no more than 9 total college credits per academic year as a full-time student, with no more than 6 credits per semester (3 credits for part-time students).

☐ This Student is a part-time student and is eligible for up to 11 college credits. (includes Homeschool students)

HS Counselor/Designee Signature ____________________________ Date ____________________________

HS Principal/Designee Signature ____________________________ Date ____________________________

District/Designee Signature ____________________________ Date ____________________________
Section C: To be Signed by Student and Student’s Parent/Guardian

Student and Parent/Guardian: Your signature below indicates that you wish the above-named Student to participate in the Concurrent Enrollment (CE) Program and that you agree to the following:

1. The Student received advice and counsel about participating in the CE Program from his/her high school.
2. The college course(s) listed above align with the Student’s Individual Career & Academic Plan (ICAP), and only courses that apply toward a college degree or certificate, or that qualify as basic skills (grade 12 only), are covered under the CE Program.
3. The Student may not enroll in a course under the CE Program unless approved by the School District.
4. The Student must meet the same prerequisites and course expectations as other college students, as noted in the current academic year Catalog and course syllabus.
5. If the Student seeks to Add, Drop, or Withdraw from a college course, he/she must meet with the High School Counselor or Concurrent Enrollment Designee to confirm desired changes.
6. The College Course Final Grade, as recorded on the College Transcript, will appear on the Student’s official high school transcript; if the Student withdraws from a course after the designated semester Drop Date, a “W” or “F” will be recorded on high school and college transcripts.
7. College Course Credits may transfer in congruence with Colorado GT Pathways or articulation agreements if the Student earns a College Course Final Grade of “C” or better.
8. If the Student receives a College Course Final Grade of “D,” “F,” or withdraws from a course after the designated semester Drop Date, the Student and Parent/Guardian will be required to repay the School District for the Tuition paid on his/her behalf.
9. The Student must apply for the College Opportunity Fund (COF) before enrolling in Concurrent Enrollment courses, and authorize use of his/her COF Stipend for all eligible credits for the semester stated above and all future semesters. College-level credits used will be deducted from the Student’s COF lifetime account.
10. In compliance with the Family Educational Rights & Privacy Act (FERPA) of 1974, the Student gives permission to the postsecondary institution to report attendance and disciplinary issues and to release final grades, in-progress grades, transcripts, class schedules, and billing information, as available, to the School District for the courses covered under the Concurrent Enrollment Program.
11. The Student and Parent/Guardian agree to give permission for the Institution of Higher Education to provide a full and complete copy of all educational records contained on the Student’s official postsecondary transcript, including all courses taken through Concurrent Enrollment and otherwise, to the Falcon School District 49 Concurrent Enrollment Administration every semester that the Student remains enrolled in the D49 Concurrent Enrollment Program.
12. Parents/Guardians of Students in need of accommodations must contact the College’s Accessibility Services Office prior to the start of the concurrent enrollment semester.

Student’s Signature ___________________________ Date _______________________

Parent’s Signature ___________________________ Date _______________________